

Fig. 1

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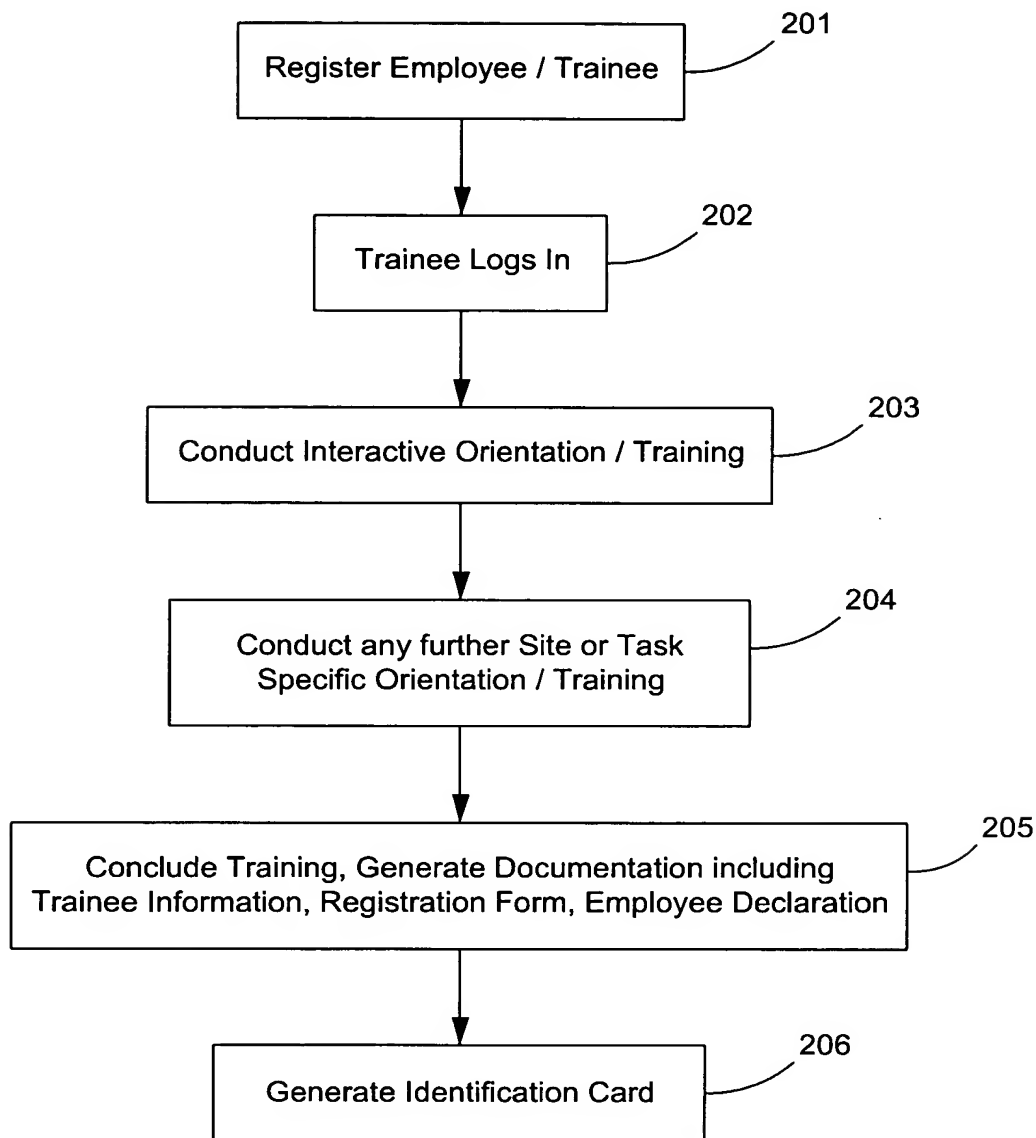


Fig. 2

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Participant Registration

Contractor Company Name:

Contractor Company Name (if not listed):

Project Name:

First Name:

Last Name:

Position / Job title:

Last 4 digits of Social Security Number:

Date of Birth:

Emergency Contact:

Emergency Contact Phone Number: () -


Married: ☐ Yes ☒ No

Children: ☐ Yes ☒ No

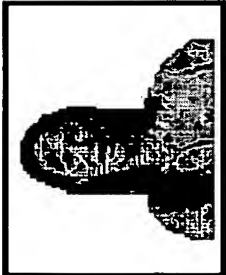
Number of dependents:

Fig. 3

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Hazard Communication



I am aware that my supervisor must inform Waste Management of and supply Waste Management with material safety data sheets associated with the chemicals that we bring on and/or otherwise use at this Waste Management landfill facility.

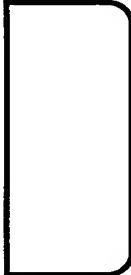


Fig. 4

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ORIENTATION PRINT OUT

PRINT

BACK

Orientation Complete Date	7/30/2003
Orientation Location	WMPA landfills
Contractor Name	Ray's Training Company
Project Name	Demo
Contractor Employee Name	John Doe
Position / Job Title	Equipment Operator
Orientation ID Number	WM2222H
Date of Birth	1/1/1942
Emergency Contact Name	Linda
Emergency Contact Phone #	555-555-5555
Married	no
Children	no
# Dependants	0

I, John Doe, understand and agree to comply with all Waste Management's safety rules, policies and procedures as presented in this orientation and as may be posted or communicated by other means within the Waste Management facility at which I will be performing services.

I understand that failure to comply with any and all of Waste Management's safety rules, policies and procedures and/or all applicable local, state and federal safety laws and regulations, will be reason for immediate dismissal from all Waste Management facilities.

John Doe

Date

Witness

Date

WM-CSO Identification

John Doe

Ray's Training Company

WM2222H

Orientation Complete Date: 7/30/2003

Approved Sites;

Tullytown

Mountain View

Approved Tasks:

Equipment Operator

(This card must be carried at all times)

Fig. 5

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ORIENTATION RESULTS for John Doe

PRINT RESULTS

MENU

I AGREE ✓
 I DISAGREE ✓
 I DISAGREE ✓ ✓
 I DISAGREE ✓ ✓ ✓

(agreed to the question first time)
 (disagreed to the question once)
 (disagreed to the question twice)
 (disagreed to the question three times)

Module 1: HAZARD COMMUNICATION

Question 1	I AGREE	I DISAGREE
Answer	✓	-
Question 2	I AGREE	I DISAGREE
Answer	✓	-
Question 3	I AGREE	I DISAGREE
Answer	✓	-
Question 4	I AGREE	I DISAGREE
Answer	✓	-
Question 5	I AGREE	I DISAGREE
Answer	✓	✓

Module 2: EMERGENCY PREPAREDNESS

Question 1	I AGREE	I DISAGREE
Answer	✓	✓ ✓
Question 2	I AGREE	I DISAGREE
Answer	✓	-
Question 3	I AGREE	I DISAGREE
Answer	✓	-

Module : PERSONAL PROTECTIVE EQUIPMENT

Question 1	I AGREE	I DISAGREE
Answer	✓	-

Fig. 6

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Report --- List of Contractors for approval locations

Contractor Company Contractor Company

New Company Name: New Company

<input type="button" value="Print Report"/>	ABC Co,	
Name	WMCSO - Identification	Approved Locations
Jones, John	WM1234	Lake View
Clinton, Bob	WM0212	Pine Grove Dauphin Meadows
Smith, Don	WM6129	Pine Grove Dauphin Meadows
Kahn, Joe	WM4567	GROWS Tullytown Warner Pottstown Mountain View
	Material Handlers Co.	GROWS
Johnson, Pat	WM6789	Tullytown Mountain View Pottstown
Brown, Bill	WM0812	Pine Grove Dauphin Meadows
Reed, Paul	WM3214	Mountain View
Egan, Marc	WM2250	Tullytown
Monk, Andrew	WM3266	Lake View
Green, Carl	WM1130	Mountain View
Maker, Gene	WM9022	Tullytown
Stillman, Abe	WM4111	Pine Grove Dauphin Meadows
Ashton, Todd	WM2415	GROWS Tullytown Warner
Taylor, Scott	WM5267	Lake View

Fig. 7